



The Department of Planning, Zoning and Development Vacating of Rights of Way/Easements

You must set up a pre-application meeting **before** submitting your application.

The following background information is required to schedule a pre-application meeting. The City of DeBary will use this to research the project site in preparation for the meeting. Although this is the minimal amount of background material required, more information is welcome. Please reference the list of Required/Recommended Pre-Application Materials. Please attach additional sheets or plans as needed.

APPLICANT

OWNER

Name: _____
Address: _____
City/State/Zip: _____
Phone: _____ Fax: _____
E-Mail Address: _____
Contact Person: _____

Name: _____
Address: _____
City/State/Zip: _____
Phone: _____ Fax: _____
E-Mail Address: _____
Contact Person: _____

Applicant is: Owner Attorney for Owner Agent for Owner Contract Purchaser
 Pre-Application Conference held on _____

If you are not the property owner, you must have the owner complete the Notarized Authorization of Owner form.

APPLICANT SIGNATURE: _____ DATE _____

APPLICANT SIGNATURE: _____ DATE _____

PROJECT INFORMATION

Project Name: _____
Address of parcel: _____
Parcel ID Number(s): _____
Size of parcel: _____
Future Land Use: _____ Existing zoning: _____
Existing Use of Property: _____

Utility: Private Septic/Well by _____ Central Sewer/Water by _____
 Other by _____



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STAFF USE ONLY

Planner's Comments/Notes: _____

_____ Notifications Discussed

Date Submitted: _____ Taken By: _____ Time: _____ a.m. /p.m.

Violation(s): _____

PA Meeting Date: _____

EMD Required: YES NO

N/C Lot Letter Required: _____

Other: _____



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Parties petitioning the **City of DeBary** to close or vacate a right of way or easement must comply with the following:

1. Prepare a petition to vacate right of way or easement and present same to the Department of Planning, Zoning, and Development, 16 Colomba Rd., DeBary, FL 32713
2. The Petitioners must show that they are the owners of a fee simple title to the lands bordering subject rights of way or easement and that the taxes have been paid.
3. The Petitioners are responsible for obtaining Letters of No Objection from Local Utility providers, and other entities when requested.

The “Utility Package” must include the following information.

- a. Written requests only (no phone or E-Mail requests per utility providers)
 - b. Provide a contact person with name, address and daytime phone number
 - c. A location map showing the area to be vacated highlighted. Major and minor roads to be shown with street names.
 - d. A copy of the plat if applicable
 - e. A copy of property survey if available
 - f. A description of the area to be vacated (a legal description is preferable)
4. Include a fee of \$660.00 to pay for associated costs. (MAKE PAYABLE TO: City of DeBary)
 5. Signed and Notarized Development Reimbursement Form
 6. The City of DeBary will place advertisement in the newspaper setting date of the city council public hearing and will advise the petitioner of the same. Advertising costs are the sole responsibility of the applicant.



**The Department of Planning, Zoning and Development
Vacating of Rights of Way/Easements**

PETITION FOR THE ABANDONMENT OF RIGHT(S) OF WAY OR EASEMENTS

TO: THE HONORABLE CITY COUNCIL OF THE CITY OF DeBARY, FLORIDA:

The undersigned Petitioner(s) respectfully request your Honorable Body to renounce and disclaim any right of the City and the Public in and to the following right(s) of way or land or interest herein, legally described as:

and the rights of the Public thereto be relinquished.

The reason(s) for requesting this abandonment of right(s) of way or easement(s) is/are: (Please thoroughly explain the basis for your request. i.e. setback or zoning requirements, etc.)

WHEREFORE, we pray that your Honorable Body adopt a Resolution setting forth a time for public hearing for the purpose of considering and taking appropriate action in compliance with Section 336.09(1)(b), Florida Statutes, and any amendments thereto.



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The Petitioner(s) being the owner(s) of the adjoining property road(s), or street(s), or land or interest therein, hereby deposit the required sum for processing this request as established by the DeBary City Council.

Signed this ___ day of _____, 20__.

SIGNATURE	PRINTED NAME	TAX PARCEL I.D. #
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SIGNATURE	PRINTED NAME	TAX PARCEL I.D. #
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SIGNATURE	PRINTED NAME	TAX PARCEL I.D. #
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SIGNATURE	PRINTED NAME	TAX PARCEL I.D. #
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Address: _____

Phone No.: _____